

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Assistant Commissioner for Patents
Washington, D.C. 20231

Atty. Dkt.: 2818-58

Date: September 24, 2001

Sir:

Attached for filing is the patent application of:

Inventor: DE SIMONE, Claudio

Entitled: COMPOSITION COMPRISING ALKALINE SPHINGOMYELINASE
FOR USE AS A DIETETIC PREPARATION, FOOD
SUPPLEMENT OR PHARMACEUTICAL PRODUCT

and including attachments as noted below:

☒ Newly executed Declaration, ☐ Copy of Declaration from prior application, ☐ Abstract
19 pages of specification and claims (including 24 numbered claims), and
3 sheets of accompanying drawing/s.

☐ Record the attached assignment and return to the undersigned.☐ Attached is a Power of Attorney.☒ Priority is hereby claimed under 35 U.S.C. § 119 based on the following foreign applications:

Application Number	Country	Day/Month/Year Filed
RM99A000376	Italy	9 June 1999
PCT/IT00/00230		7 June 2000

, respectively, the entire content of which is hereby incorporated by reference in this application..

☐ Certified copy(ies) of foreign application(s) is/are attached.☐ Certified copy(ies) filed on _____ in prior appln. no. _____ filed _____☐ Please amend the specification by inserting the following paragraph before the first line: --This application claims the benefit of Provisional Application No. _____, filed _____, the entire content of which is hereby incorporated by reference in this application.--☒ Please amend the specification by inserting the following paragraph before the first line: --This application is a ☒ continuation of PCT/IT00/00230, filed 7 June 2000, the entire content of which is hereby incorporated by reference in this application.--☐ Petition filed in prior application to extend its life to insure co-pendency.☒ The prior application is assigned to MENDES S.R.L. UNIPERSONALE (MENDES S.U.R.L.).☒ It is hereby requested that the Examiner consider the art cited in the parent application by applicant and/or the Examiner for the reasons stated therein. A listing of that art is attached.☐ Applicant claims "small entity" status. ☐ "Small entity" statement attached.☐ Please enter the attached and/or below preliminary amendment prior to calculation of filing fee:

☒ Also attached: ☒ Information Disclosure Statement w/PTO-1449 Form, International Search Report and References; ☐ Non-Publication Request; ☐ Nucleotide and/or Amino Acid Sequence Submission; ☐ Statement deleting Inventor(s) named in prior application; ☐ Other:

FILING FEE IS BASED ON CLAIMS AS FILED LESS ANY HERewith CANCELED

Basic Filing Fee				\$	710.00
Total effective claims	36	- 20 (at least 20) =	16	x \$ 18.00	\$ 288.00
Independent claims	2	- 3 (at least 3) =	0	x \$ 80.00	\$ 0.00
If any proper multiple dependent claims now added for first time, add \$270.00 (ignore improper)				\$	270.00
				SUBTOTAL	\$ 1268.00
If "small entity," then enter half (1/2) of subtotal and subtract				-\$	(0.00)
				SECOND SUBTOTAL	\$ 1268.00
Assignment Recording Fee (\$40.00)				\$	0.00
				TOTAL FEE ENCLOSED	\$ 1,268.00

Any future submission requiring an extension of time is hereby stated to include a petition for such time extension.

The Commissioner is hereby authorized to charge any deficiency in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our **Account No. 14-1140**. A duplicate copy of this sheet is attached.

1100 North Glebe Road, 8th Floor
Arlington, Virginia 22201-4714
Telephone: (703) 816-4000
Facsimile: (703) 816-4100
ARC:tat

NIXON & VANDERHYE P.C.

By Atty: Arthur R. Crawford, Reg. No. 25,327

Signature: _____

11002 U.S. PTO
09/960652
09/24/01

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		SUBTOTAL	\$ 1268.00
If "small entity," then enter half (1/2) of subtotal and subtract		-\$ (0.00)
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Facsimile: (703) 816-4100
ARC:tat

NIXON & VANDERHYTE P.C.

By Atty: Arthur R. Crawford, Reg. No. 25,327

Signature: _____

Case No. _____

Nixon & Vanderhye P.C. (12/97)

RULE 63 (37 C.F.R. 1.63)
DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"Composition comprising alkaline sphingomyelinase for use as a dietetic preparation, food supplement or pharmaceutical product"

the specification of which (check applicable box(es)):

☐ is attached hereto

☐ was filed on _____

as U.S. Application Serial No. _____

☒ was filed as PCT International application No. _____

PCT/IT00/00230

on 7/6/2000

and (if applicable to U.S. or PCT application) was amended on _____

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with 37 C.F.R. 1.56. I hereby claim foreign priority benefits under 35 U.S.C. 119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed or, if no priority is claimed, before the filing date of this application:

Priority Foreign Application(s):

Application Number
RM99A000376

Country
ITALY

Day/Month/Year Filed
9/6/1999

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

Application Number

Date/Month/Year Filed

I hereby claim the benefit under 35 U.S.C. 120/365 of all prior United States and PCT international applications listed above or below and, insofar as the subject matter of each of the claims of this application is not disclosed in such prior applications in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior applications and the national or PCT international filing date of this application:

Prior U.S./PCT Application(s):

Application Serial No.

Day/Month/Year Filed

Status: patented
pending, abandoned

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. And I hereby appoint **NIXON & VANDERHYE P.C., 1100 North Glebe Rd., 8th Floor, Arlington, VA 22201-4714, telephone number (703) 816-4000 (to whom all communications are to be directed)**, and the following attorneys thereof (of the same address) individually and collectively my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent: Arthur R. Crawford, 25327; Larry S. Nixon, 25640; Robert A. Vanderhye, 27076; James T. Hosmer, 30184; Robert W. Faris, 31352; Richard G. Besha, 22770; Mark E. Nusbaum, 32348; Michael J. Keenan, 32106; Bryan H. Davidson, 30251; Stanley C. Spooner, 27393; Leonard C. Mitchard, 29009; Duane M. Byers, 33363; Jeffry H. Nelson, 30481; John R. Lastova, 33149; H. Warren Burnam, Jr. 29366; Thomas E. Byrne, 32205; Mary J. Wilson, 32955; J. Scott Davidson, 33489; Alan M. Kagen, 36178; William J. Griffin, 31260; Robert A. Molan, 29834; B. J. Sadoff, 36663; James D. Berquist, 34776; Undeep S. Gill, 37334.

Inventor's Signature: _____

Inventor: _____

Claudio

(first)

MI

DE SIMONE

(last)

Italian

(citizenship)

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Via Nuoro, 12 - Ardea RM

(state/country) Italy

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(Zip Code) I-00040

Inventor's Signature: _____

Inventor: _____

(first)

MI

(last)

(citizenship)

Date: _____

Residence: (city)

(state/country)

Post Office Address:

(Zip Code)

Inventor's Signature: _____

Inventor: _____

(first)

MI

(last)

(citizenship)

Date: _____

Residence: (city)

(state/country)

Post Office Address:

(Zip Code)

FOR ADDITIONAL INVENTORS, check box ☐ and attach sheet with same information and signature and date for each.